## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

**Application or Docket Number** 

09/529962

		CLAIM	S AS FILE	) - PA	RT I		SMALI	ENTITY		OTHER	THAN
500			(Column 1)		(Column 2)		TYPE		OR	SMALL	ENTITY
FOR			JMBER FILED		NUMBER	EXTRA	RATE	FEE	]	RATE	FEE
BASIC FEE								Ž.	OR		SHO)
TOTAL CLAIMS			7 mini	us 20=	*		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS 2 minus 3 = *						X39=		OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT					+130=		OR	+260=			
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL		OR	TOTAL	140	
CLAIMS AS AMENDED - PART II									-	OTHER	THAN
		(Columr		((	Column 2)	(Column 3)	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIM REMAINI AFTEI AMENDM	ING R	Р	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	**		=	X39=		OR	X78=	
	FIRST PRESE	NTATION (	OF MULTIPLE [	DEPEN	DENT CLAIM		+130=		OR	+260=	
							TOTA	_	ייין	TOTAL	
							ADDIT. FEI	<u> </u>	OR	ADDIT. FEE	L
	unasees e	(Columi		((	Column 2)	(Column 3)			IOH ,	ADDIT. FEE	
ENT B		CLAIM REMAIN AFTER	IS ING R		HIGHEST NUMBER REVIOUSLY	(Column 3) PRESENT EXTRA		ADDI- TIONAL	JOH ,	ADDIT. FEE	ADDI- TIONAL FEE
NOMENT B	Total	CLAIM REMAIN	IS ING R		HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT	ADDIT. FEI	ADDI-	OR		
AMENDMENT B	Independent	CLAIM REMAIN! AFTE! AMENDM	IS ING RIENT Minus Minus	P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	ADDIT. FEI	ADDI- TIONAL	OR	RATE	TIONAL
AMENDMENT B	Independent	CLAIM REMAIN! AFTE! AMENDM	IS ING R BENT Minus	P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RATE  X\$ 9=  X39=	ADDI- TIONAL	OR OR	RATE X\$18= X78=	TIONAL
AMENDMENT B	Independent	CLAIM REMAIN! AFTE! AMENDM	IS ING R IENT Minus Minus	P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	ADDIT. FEI  RATE  X\$ 9=  X39=  +130=	ADDI- TIONAL FEE	OR	RATE  X\$18=  X78=  +260=	TIONAL
AMENDMENT B	Independent	CLAIM REMAIN! AFTE! AMENDM	IS ING R IENT Minus Minus	P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RATE  X\$ 9=  X39=	ADDI- TIONAL FEE	OR OR	RATE X\$18= X78=	TIONAL
AMENDMENTB	Independent	CLAIM REMAIN AFTER AMENDM  *  NTATION (	Minus OF MULTIPLE (	P	HIGHEST NUMBER REVIOUSLY PAID FOR * DENT CLAIM	PRESENT EXTRA	ADDIT. FEI  RATE  X\$ 9=  X39=  +130=  TOTAI	ADDI- TIONAL FEE	OR OR	RATE  X\$18=  X78=  +260=  TOTAL	TIONAL
AMENDMENT	Independent	CLAIM REMAIN AFTER AMENDM * *	Minus  OF MULTIPLE I  IN 1)  IS ING R	P *** DEPEN	HIGHEST NUMBER REVIOUSLY PAID FOR * DENT CLAIM	PRESENT EXTRA =	ADDIT. FEI  RATE  X\$ 9=  X39=  +130=  TOTAI	ADDI- TIONAL FEE	OR OR	RATE  X\$18=  X78=  +260=  TOTAL	TIONAL
AMENDMENT	Independent	CLAIM REMAIN AFTER AMENDM  *  *  *  *  *  *  *  *  *  *  *  *  *	Minus  OF MULTIPLE I  IN 1)  IS ING R	P *** DEPEN	HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY	PRESENT EXTRA  =  (Column 3)  PRESENT	RATE  X\$ 9=  X39=  +130=  TOTAL ADDIT. FEE	ADDI-TIONAL FEE	OR OR	X\$18= X78= +260= TOTAL ADDIT. FEE	ADDI- TIONAL
AMENDMENT	Independent FIRST PRESE	CLAIM REMAIN AFTER AMENDM  *  *  *  *  *  *  *  *  *  *  *  *  *	Minus  Minus  OF MULTIPLE I  IS ING R  IS ING R  IENT	P +++ DEPEN	HIGHEST NUMBER REVIOUSLY PAID FOR  DENT CLAIM  Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA  = (Column 3)  PRESENT EXTRA	RATE  X\$ 9=  X39=  +130=  TOTAL ADDIT. FEE  RATE  X\$ 9=	ADDI- TIONAL FEE	OR OR OR	RATE  X\$18=  X78= +260=  TOTAL ADDIT. FEE  RATE  X\$18=	ADDI- TIONAL
AMENDMENT C AMENDMENT B	Independent FIRST PRESE  Total Independent	CLAIM REMAINI AFTER AMENDM  *  *  *  *  *  *  *  *  *  *  *  *  *	Minus  Minus  OF MULTIPLE I  ING R HENT  Minus  Minus  Minus  Minus  Minus  Minus  Minus  Minus	P +++ DEPEN	HIGHEST NUMBER REVIOUSLY PAID FOR  *  DENT CLAIM  Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA  =  (Column 3)  PRESENT EXTRA  =  =  =	RATE  X\$ 9=  X39=  +130=  TOTAL ADDIT. FEE	ADDI- TIONAL FEE	OR OR OR	RATE  X\$18=  X78=  +260=  TOTAL ADDIT. FEE	ADDI- TIONAL
AMENDMENT C AMENDMENT	Independent FIRST PRESE  Total Independent FIRST PRESE	CLAIM REMAINI AFTER AMENDM  *  *  *  *  *  *  *  *  *  *  *  *  *	Minus  OF MULTIPLE I  Minus  OF MULTIPLE I  Minus  OF MULTIPLE I	DEPENION OF THE PROPERTY OF TH	HIGHEST NUMBER REVIOUSLY PAID FOR  * DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR  * DENT CLAIM	PRESENT EXTRA  =  (Column 3)  PRESENT EXTRA  =  =	ADDIT. FEI  RATE  X\$ 9=  +130=  TOTAL ADDIT. FEE  RATE  X\$ 9=  X39=  +130=	ADDI- TIONAL FEE  ADDI- TIONAL FEE	OR OR OR	RATE  X\$18=  X78=  +260=  TOTAL ADDIT. FEE  RATE  X\$18=  X78=  +260=	ADDI- TIONAL
AMENDMENT C AMENDMENT	Independent FIRST PRESE  Total Independent	CLAIM REMAINI AFTER AMENDM  *  *  NTATION (  CLAIM REMAINI AFTER AMENDM  *  NTATION (  mn 1 is less inber Previous)	Minus  Minus  OF MULTIPLE I  Minus  OF MULTIPLE I  Minus  OF MULTIPLE I  Minus	DEPENI  COLUMN 2  THIS SP	HIGHEST NUMBER REVIOUSLY PAID FOR  * DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR  * DENT CLAIM ACE is less that	PRESENT EXTRA  = = (Column 3)  PRESENT EXTRA  = = = elumn 3. an 20, enter "20."	RATE  X\$ 9=  X39=  +130=  TOTAL  ADDIT. FEE  RATE  X\$ 9=  X39=  +130=	ADDI-TIONAL FEE	OR OR OR OR	RATE  X\$18=  X78=  +260=  TOTAL ADDIT. FEE  RATE  X\$18=  X78=	ADDI- TIONAL